

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kevin Ayers
 C/o Michael R. Gray, Esq.
 500 IDS Center
 80 South Eighth Street
 Minneapolis, Minnesota

2. Article Number

(Transfer from service label)

7003 3110 0003 7320 7573

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Shay Shapiro*☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

2/6/07

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

207 W 80th - MHT

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes